

Registration Form

Name	Title		
Profession_	Organiz	ration	
Address_	City	State	Zip
Please Check OneHome Addr	essWork Address		
Work Phone () Ho	me Phone ()	E-Mail	
CEU Information Nursing License Number:	Social Security N	Jumber:	
Fees Standard Registration: \$60.00 for KTPC members \$75.00 for Non-KTPC members \$ 85.00 for conference fees and 1 years \$ 35.00 for college students include \$ 15.00 for high school students include Total Enclosed \$	es 1 year membership to KTPC	PC	
Payment Methods: Accepted methods of p cards are accepted. Please make checks of			se orders. No credit
Breakout Sessions (Please choose On Thursday, September 29, 2005	ne from each time slot):		
1:45 - 3:00 PM		e Waist cocesses for Decision Ma (Family Learning thru Inte.	a king raction Program /Transitional Living Prog
3:15 - 4:30 PM Rev. Dan Newman Dr. Betsy Neale Mark Johnson Teresa Scott Dr. Hatim Omar		ts to Talk With Childrei I Am Who I Am I Thini dults	
Friday, September 30, 2005 8:30 - 9:45 AM		"I Am Who I Think I A Youth Development In Prevention	(m?") Teen Sexuality Programs
10:00 - 11:15 AM Concurred Peggy Brick Renee Knight T.J. Delahanthy Dr. Susan Barnett HIV+ Panel	9 9	Youth Development in ion for Youths with Spe	Teen Sexuality Programs ecial Health Care Need